## **Best Available Copy**

ERIAL NUMBER		EN INC DATE T	C) 400	1.55	OUD ADT UNIT	ATTORNEY D	OCKET NO
		FILING DATE	CLASS	GR	OUP ART UNIT		
09/169,77	6	10/08/98	600		3737	A-65600	/нсн
		N FRANCISCO, C RTOLA VALLEY,		s. Johns	SON, PALO AL	ro, ca;	
**CONTINUIN VERIFIED	G DOMESTIC	DATA******	****	****			
**371 (NAT' VERIFIED	L STAGE) D	ATA********	*****	***			
**FOREIGN A VERIFIED	PPLICATION	S*******					-
FOREIGN FIL	ING LICENS	E GRANTED 10/2	27/98	****	** SMALL ENT	[TY ****	
eign Priority claime USC 119 (a-d) con ified and Acknowle	ditions met	yes □no yes □no □Met after	Allowance	STATE OR COUNTRY CA	SHEETS DRAWING 2	TOTAL CLAIMS 21	INDEPENDENT CLAIMS 2
	Examiner A  ACH TEST A  CADERO CEN	LBRITTON & HER				- <b>I</b>	· · · · · · · · · · · · · · · · · · ·
APPARATUS	AND METHOD	FOR BREATH MO	ONITORIN	G			
FILING FEE RECEIVED \$406	FEES: Authority has been given in Paper No to charge/credit DEPOSIT ACCOUNT NO for the following:    All Fees   1.16 Fees (Filing)   1.17 Fees (Processing Ext. of time)   1.18 Fees (Issue)   Other   Credit						